

# MC4810

### **Medicare Supplement Insurance Policies**

Help to reduce out-of-pocket costs that Medicare does not pay.

"We are insured, protected, and free to enjoy life."

United American Insurance Company Since 1947

## United American's Medicare Supplement plans are a smart choice ...

#### **Why Choose United American Insurance Company?**

United American is a name trusted by doctors and hospitals nationwide. Medicare was signed into law in 1966, and that year United American Insurance Company developed its first Medicare Supplement program. UA has been providing Medicare Supplement insurance ever since, and we have developed an industry-wide reputation for quality Senior insurance products. Today, UA is one of the largest nationwide underwriters of individual insurance to supplement Medicare\*, and we are proud of our legacy of quality products and superior service.

\* NAIC Medicare Experience Report by Direct Premium Earned for Total Individual Policies, August 2014.

#### Freedom to Choose & Nationwide Acceptance

There is no designated physician list. There is no approval process to see a specialist. Our Medicare Supplement plans are recognized and accepted nationwide.

#### **Strength of Tradition**

A Medicare Supplement policy from United American is protection that can never be canceled (unless there is a material misrepresentation) as long as premiums are paid on time.

#### **Assurance of Service**

- Medicare Supplement coverage from United American features on-the-spot qualification in most cases.
- Claim checks are issued and processed on average within one week (per 2013 Service Performance Record), often arriving before Medicare's Explanation of Benefits.

• We're neighbors! We have an Agent in your local area.

#### Financial Strength &

- For more than 35 consecutive years, UA has earned the A+ (Superior) Financial Strength Rating from A.M. Best Company (rating as of 6/14).\*
- UA has been rated A+ (Strong) for Financial Strength by Standard & Poor's (rating as of 8/14).\*
- These ratings refer only to the financial strength of the company and are not a recommendation of the specific policy provisions, rates or practices of the insurance company.

#### 30-Day review period

If after receiving your policy you want to cancel for any reason, simply return your policy and I.D. card to our Home Office within the 30-day period. Any premium, less any claims paid, is refunded.

#### **Effective Date of Coverage**

When the policy applied for has been issued.

United American Insurance Company is not connected with or endorsed by the U.S. Government or federal Medicare program. Policies and benefits may vary by state and have some limitations and exclusions. Individual Medicare Supplement policy form MC4810 is available from our Company. This is a solicitation for insurance. You may be contacted by an Agent representing United American Insurance Company.



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#### **What Will I Owe After Medicare Pays?**

After Medicare benefits have been paid, you will still be responsible for certain costs. These expenses are referred to as 'out-of-pocket.' Below is an outline of typical out-of-pocket expenses.

#### After Medicare, United American's MC4810 pays:

- Medicare's Blood Deductible
- Part A Hospital Coinsurance (61st through 90th day and 60-day lifetime reserve)
- Skilled Nursing Facility Care (21st through 100th day)
- All hospital charges after Medicare NO LIMIT
- Home Healthcare Usual and Customary Charges\* for medically necessary home healthcare visits not covered by Medicare. Maximum of 40 visits in any 12-month period
- Part B Medical Coinsurance All Medicare coinsurance for medical and hospital expense

#### Optional MC4810 Benefits for Additional Coverage

- Part A Deductible Benefit 100% of Part A deductible
- Part B Deductible Benefit 100% of annual Part B deductible
- · Part B Excess Charges Benefit
- Additional Home Healthcare Benefit Usual and Customary Charges\* for up to 365 visits in a 12-month period
- Foreign Travel Emergency 80% after \$250 deductible (\$50,000 lifetime maximum)
- All Medicare coinsurance for medical and outpatient hospital expense

# Optional MC4810 Medicare Part B Copayment Benefit Adjustment for Reduced Premiums

 You pay up to \$20 copayment for office visit and up to \$50 copayment for emergency room visit

#### (See Outline of Coverage for more details)

\* Usual and Customary Charges mean: The prevailing rates, as determined by the Company, for any service or materials in the geographic area where furnished. This definition shall only apply to the Wisconsin mandated benefits for Chiropractic Treatment, Treatment of Diabetes and Home Care Benefits.

#### **Limitations and Exclusions**

No benefits are payable for: any expense which you are not legally obligated to pay; or, any services that are not medically necessary as determined by Medicare, or are not furnished at the direction of, and under the supervision of, a physician; or any portion of any expense for which payment is made by Medicare; or custodial or intermediate level care, or rest cures; or, any type of expense not eligible for coverage under Medicare.

#### **Pre-existing Conditions**

With the exception of open enrollment/guaranteed issue periods, loss due to injury or sickness for which medical advice or treatment was recommended or given by a physician within 6 months prior to policy effective date is not covered unless the loss is incurred more than 60 days after the effective date. Waiting period waived if replacing a Medicare Supplement policy.

# APPLICANT NOTICE and CONDITIONAL RECEIPT

#### **Applicant Information:**

Keep this document. It highlights the benefits of your policy. It is not a contract. Your actual policy provisions will govern your benefits.

#### **Instructions to Agent:**

Complete this section and leave with the applicant. Fill in the selected plan as chosen on the application in the spaces provided above and complete the conditional receipt.

| I,  |
|---|
| HAVE APPLIED FOR THE MC4810 POLICY BENEFITS:                    |
| I understand this brochure only highlights the available        |
| policies/features and I should refer to my Outline of Coverage  |
| and the policy for specific benefit provisions and limitations. |